

HUMAN SERVICES DEPARTMENT[441]

Adopted and Filed Emergency

Pursuant to the authority of Iowa Code section 249A.4 and 2017 Iowa Acts, House File 653, section 12(15)(a)(1), the Department of Human Services amends Chapter 79, “Other Policies Relating to Providers of Medical and Remedial Care,” Iowa Administrative Code.

This amendment implements a cost-containment strategy to adjust the reimbursement policy in order to eliminate the primary care physician rate increase originally authorized by the federal Health Care and Education Reconciliation Act of 2010, Section 1202, Pub. L. No. 111-152, 42 U.S.C. §1396a(a)(13)(C), that allows qualified primary care physicians to receive the greater of the Medicare rate or Medicaid rate for a specified set of “primary care” current procedural terminology (CPT) procedure codes.

The Council on Human Services adopted this amendment on June 14, 2017.

Pursuant to Iowa Code section 17A.4(3), the Department finds that notice and public participation are unnecessary because emergency rule making is authorized by 2017 Iowa Acts, House File 653, section 12(15)(c).

Pursuant to Iowa Code section 17A.5(2)“b”(1)(a), the Department also finds that the normal effective date of this amendment, 35 days after publication, should be waived and the amendment made effective July 1, 2017, because 2017 Iowa Acts, House File 653, section 12(15)(c), authorizes the Department to adopt emergency rules to implement this cost-containment strategy.

This amendment is also published herein under Notice of Intended Action as **ARC 3167C** to allow for public comment.

This amendment does not provide for waivers in specified situations because requests for the waiver of any rule may be submitted under the Department’s general rule on exceptions at 441—1.8(17A,217).

After analysis and review of this rule making, no impact on jobs has been found.

This amendment is intended to implement Iowa Code section 249A.4 and 2017 Iowa Acts, House File 653, section 12(15)(a)(1).

The Administrative Rules Review Committee reviewed this amendment on June 13, 2017.

This amendment became effective July 1, 2017.

The following amendment is adopted.

Amend paragraph **79.1(7)“c,”** introductory paragraph, as follows:

c. Payment for primary care services. To the extent required by 42 U.S.C. § 1396a(a)(13)(C), primary care services furnished in calendar year 2013 or 2014 by a qualified primary care physician or under the supervision of a qualified primary care physician shall be paid as provided pursuant to subparagraphs (1) to (4) and (6) of this paragraph (79.1(7) “c”). Primary care services furnished ~~on or after~~ January 1, 2015, through June 30, 2017, by a qualified primary care physician or under the supervision of a qualified primary care physician shall be paid as provided pursuant to subparagraphs (1) to (3), (5), and (7) of this paragraph (79.1(7) “c”).

[Filed Emergency 6/14/17, effective 7/1/17]

[Published 7/5/17]

EDITOR’S NOTE: For replacement pages for IAC, see IAC Supplement 7/5/17.